

TITLE XIX

Revision: HCFA-AT-80-38 (BPP)

July 1, 1984

State: VERMONT

CITATION: 42 CFR 431.11

Deleted: (AT-79-29)1.2 Organization for Administration

- a. ATTACHMENT 1.2-A contains a description of the organization and functions of the Medicaid agency and an organization chart of the agency.
- b. ATTACHMENT 1.2-B contains a description and organizational chart of the Department of Vermont Health Access (DVHA); DVHA has been designated as the medical assistance department.
- c. ATTACHMENT 1.2-C contains a description of the kinds and numbers of professional medical personnel and supporting staff used in the administration of the Plan and their responsibilities.
- d. Eligibility determinations are made by State or local staff of an agency other than the agency named in paragraph 1.1 (a). ATTACHMENT 1.2-D contains a description of the staff designated to make such determinations and the functions they will perform.

Deleted: Within the State agency, the Office of Vermont Health Access (OVHA)**Deleted:****Deleted:** unit**Deleted:** ATTACHMENT 1.2-B contains a description and organizational chart of OVHA.

[X] Not applicable. Only the staff of the agency named in paragraph 1.1 (a) make such determinations.

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ORGANIZATION AND FUNCTION OF STATE AGENCY

Function of the Department of Vermont Health Access (DVHA) is addressed in Attachment 1.2-B. The Department for Children and Families (DCF) is one of the major components of the Agency of Human Services (AHS). Within the DCF, the Economic Services Division (ESD) encompasses the functions regarding Medicaid eligibility. The DCF's principal functions and structure are outlined below:

Child Development Division (CDD)

CDD's goal is to increase accessibility to high-quality child care and child development services by working with programs within communities to coordinate and deliver services that meet families' needs. Direct services for children and families include regulating early childhood and afterschool programs; early intervention services; information, resource and referral for families; parent education and family support services. CDD provides technical assistance, professional development, and mentoring opportunities to Vermont's early childhood and afterschool workforce, and are involved in developing early childhood and afterschool systems in Vermont.

Disability Determination Services (DDS)

DDS determines the eligibility of Vermonters who apply for disability benefits under Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI); and determines the medical eligibility of Vermonters who apply for Medicaid based on having a disability.

Economic Services Division (ESD)

ESD's mission is to help Vermonters find a path to a better life. ESD administers programs which include assistance-to-work; supplemental nutrition assistance; fuel assistance; and health care.

Family Services Division (FSD)

FSD's mission is to protect children and strengthen families in partnership with families and communities. FSD services include child abuse/neglect intake, investigation and assessment; ongoing services to families at risk; care, treatment and permanency planning of children in state custody; probation and other restorative justice services for delinquent youth; post adoption supports and subsidy for children adopted through foster care; transition services for youth; and the Woodside Juvenile Rehabilitation Facility.

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Deleted: Responsible for assuring a statewide system that promotes and supports safe, accessible, quality child care for Vermont families. Responsible for administering TANF Grants to Community Agencies. Children's Upstream Services, Child Care Services, licensing, workforce development, commodities, Children's Health Programs, Parent Child Centers, Success by Six, and Head Start programs.¶

Deleted: Responsible for helping Vermonters establish and enforce child support court orders, locating missing parents, and ensuring the steady flow of economic support to Vermont children.¶

Deleted: Child Welfare & Youth Justice¶

Responsible for promoting social, emotional, and physical well being and safety of Vermont's children and families. Responsible for providing protective, developmental, therapeutic, probation, and support services for children and families in partnership with schools, businesses, community leaders, service providers, families, and youth statewide.¶

¶ Disability Determinations¶
Responsible for processing and evaluating disability claims. Responsible for developing medical evidence and rendering the initial determination on whether or not a claimant is or blind under the law.¶

Deleted: Economic Services¶
Responsible for the monitoring, evaluation, and operation of the Reach Up/TANF, Fuel Assistance, Food and Nutrition, General and Emergency Assistance, Essential Person, Aid to the Aged, Blind, and Disabled, and Health Care Assistance programs as it pertains to eligibility determination. Responsible for reviewing and analyzing proposed ... [1]

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Office of Child Support (OCS)

OCS is responsible for establishing, collecting upon, enforcing, and modifying support orders for children who do not live with both parents, is responsible for helping Vermonters establish parentage; establish an order for child and medical support; modify or enforce an existing order for child and medical support; make support payments to the custodial parent; and locate a missing non-custodial parent.

Deleted: Responsible for developing, analyzing, and interpreting rules and regulations for these programs, collecting data specific to the operation of these programs and evaluating the effects and attributes of given programs in relation to department or Agency goals and objectives.¶

¶
Economic Opportunity¶
Responsible for increasing the self-sufficiency of Vermonters and strengthening Vermont communities by connecting communities to governmental and private resources to eliminate poverty through weatherization services, support for community-based organizations engaged anti-poverty efforts, and food and nutrition services, including nutrition education, commodity food distribution, and farmer's market food coupon distribution.¶

Office of Economic Opportunity (OEO)

OEO's mission is to increase the self-sufficiency of Vermonters, strengthen Vermont communities, and eliminate the causes and symptoms of poverty. OEO manages programs and grants; identifies and develops resources; provides training and technical assistance; advocates for community-based organizations, and connects communities to resources within government and the private sector.

¶
Field Services¶
Responsible for ensuring accountability in each geographic region of the state to ensure optimal functioning, responsible for working closely with community partnerships, private and state program managers, and individuals and families served by the agency.¶

Within the Agency of Human Services, the Department of Disabilities, Aging and Independent Living, (DAIL) assists older persons, children and adults with disabilities to live as independently as possible. The DAIL's principal functions and structure are as follows:

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Licensing & Protection

Responsible for protecting vulnerable Vermonters through licensing health care providers, and investigating complaints and allegations of abuse, neglect and exploitation.

Advocacy & Independent Living

Responsible for helping elders and adults with disabilities to live as independently as possible in the community.

Blind & Visually Impaired

Responsible for helping Vermonters with blindness or visual impairment work and live independently.

Developmental Services

Responsible for helping children and adults with developmental disabilities and children with health impairments and/or physical disabilities to live as independently as possible within their family, home and community.

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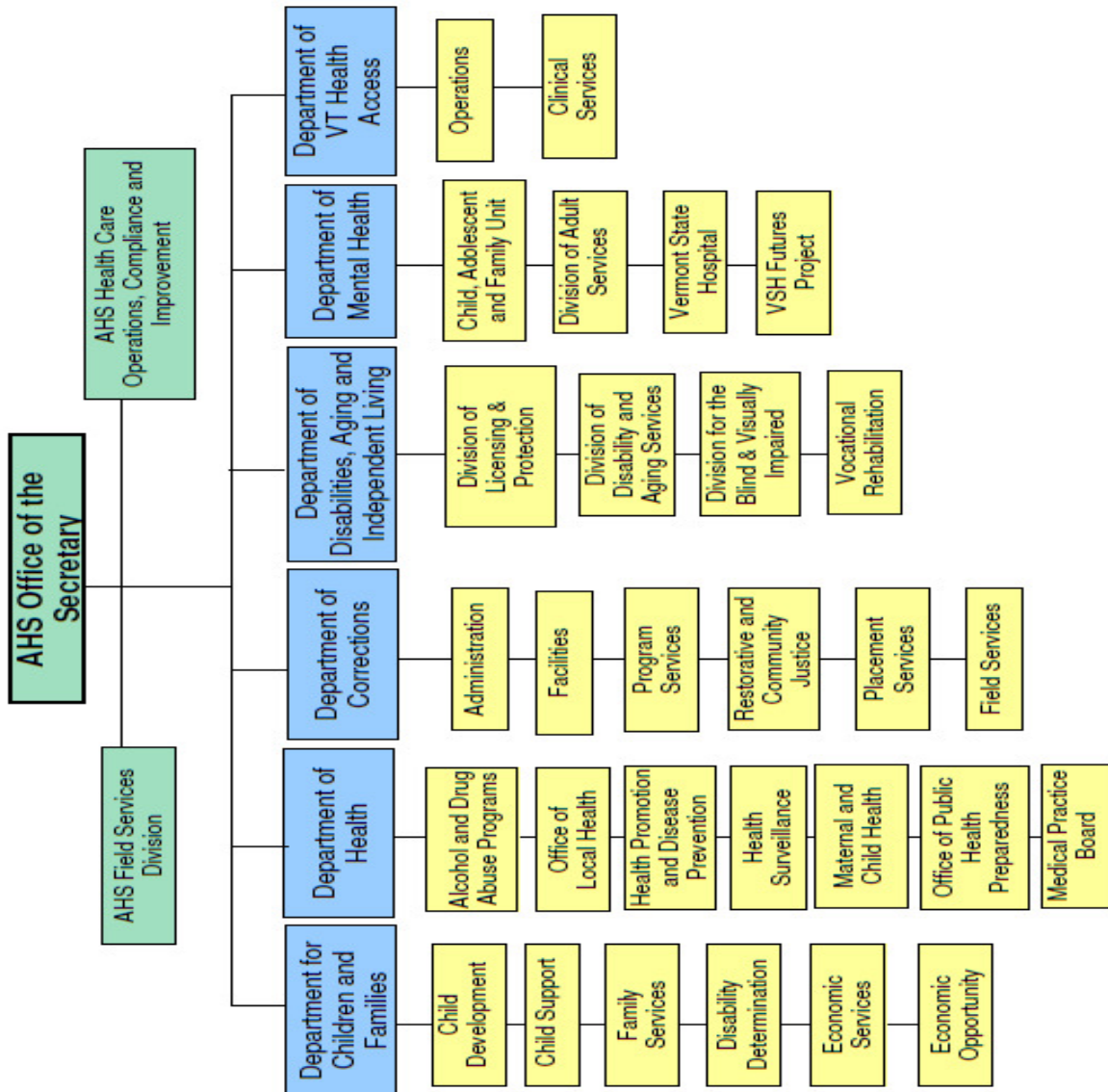
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FUNCTION OF THE DEPARTMENT OF VERMONT HEALTH ACCESS

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The Department of Vermont Health Access (DVHA) is assigned program responsibility for medical assistance furnished eligible individuals under Title XIX of the Social Security Act. The DVHA has a Commissioner, a Director of Health Services and Managed Care, a Director of Health Care Reform, a Director of Medicaid Policy, Fiscal and Support Services, a Director of the Blueprint for Health Program, and a Medical Director. The DVHA is described below:

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Blueprint for Health

Supports, monitors and manages the state's multi-insurer initiative designed to integrate a system of health care for patients, improve the health of the overall population, and improve control over health care costs by promoting health maintenance, prevention, and care coordination and management at the provider level.

Chronic Care

With nurses and social workers located throughout the state this unit identifies and assists Medicaid beneficiaries with chronic health conditions to access clinically appropriate health care information and services; coordinates the efficient delivery of health care to this population by addressing barriers to care, bridging care gaps, and avoiding duplication of services; and educates and empowers this population to self-manage their chronic conditions. This program is closely aligned with the care coordination efforts of the Blueprint for Health.

Clinical Operations

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Monitors and evaluates the quality, appropriateness and effectiveness of health care services requested for beneficiaries. Ensures requests for services are reviewed and processed efficiently and within time frames outlined in Medicaid Rule. Identifies over- and under-utilization of health care services through the Prior Authorization (PA) review process and case tracking. Specific functions include developing clinical criteria and assuring correct coding for medical benefits; reviewing provider appeals; providing provider education related to specific medical procedures; and performing quality improvement activities to enhance medical benefits for beneficiaries.

Coordination of Benefits (COB)

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Works with providers, beneficiaries, and other insurance companies to ensure that Medicaid is payer of last resort. COB also administers the premium assistance programs by performing analyses to ensure beneficiaries are placed in the most cost-effective program.

Data/Reimbursement

Provides Medicaid data to other state agencies, the legislature and other stakeholders. Provides data for mandatory federal reporting to the Centers for Medicare and Medicaid Services (CMS). Provides analyses for the budget development process. Reimbursement oversees the claims processing function of the Medicaid program and provides direction, guidance and interpretation of the state plan to our fiscal agent who processes the Medicaid claims. Develops projections, implements updates, and analyzes the impact of reimbursement methodologies.

Fiscal Operations

Supports, monitors, manages and reports all aspects of fiscal planning and responsibility. Functions include vendor payments, timesheets, expense reports, grants, contracts, purchasing, financial monitoring, budgeting and other relevant practices, procedures, and processes.

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, long-term care, data analysis, coordination of benefits, provider¶ relations. ¶
provider reimbursement, policy and reports, and administrative services. ¶
The members of the management team responsible for these units have ongoing communications with other departments within the Agency of Human Services, provider organizations, advocacy organizations, and contractors. The Office contracts for pharmacy benefits management, claims processing, provider enrollment, member services, and ombudsman services.¶
¶
The responsibilities of the clinical unit are addressed in ATTACHMENT 1.2-C.¶

Deleted: The pharmacy unit manages the contract for pharmacy benefits management and is in daily contact with the contractors. A pharmacist is based at the OVHA site. They also support the Drug Utilization Review Board and interact with them to assist in the direction of the program. In conjunction with the PBM contractor, they develop and manage the preferred drug list. They also perform ad hoc reporting to respond to management requests and perform claims analysis as needed.¶

Deleted: The long term care unit liaisons with the Department of Aging and Independent Living regarding programs and initiatives that impact those who need long-term care services. They investigate and develop pilots for new programs, such as PACE (Program of All-Inclusive Care for the Elderly). In addition, responsibility for the external quality review organization for the 1115 waiver programs rests in this unit.¶
¶
The data analysis unit is responsible for retrieval, analysis, and projections related to all data available on beneficiaries of the health care programs.¶

Deleted: The coordination of benefits unit is responsible for maximizing recoveries and cost offset related to expenses for services delivered through the health care programs.¶

Deleted: The provider relations unit provides more sophisticated services to our provider community beyond the initial provider relations included in our fiscal agent contract. They also work on improving and expanding our communications with providers.¶

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Health Care Reform

Responsible for providing oversight and coordination across state government, and with other public and private partners, to foster collaboration, inclusiveness, consistency, and effectiveness in state and federal health care reform. Leads on Health Information Technology (HIT) and Health Information Exchange (HIE) policy, planning and oversight.

Managed Care

Responsible for managing care arrangements for beneficiaries covered under the Medicaid Global Commitment to Health waiver, and works to develop new initiatives for DVHA which includes monitoring programs for compliance with quality standards to improve services for Medicaid beneficiaries.

Pharmacy

Ensures beneficiaries receive medically necessary medications in the most cost-effective manner. Pharmacy Unit staff members and the contracted Prescription Benefit Manager (PBM) work with providers, pharmacies and beneficiaries on benefits issues, clinical criteria, claims processing and appeals related to pharmacy. Responsible for the Drug Utilization Review (DUR) Board.

Program Policy

Responsible for coverage rules, fair hearings, grievances and appeals, HIPAA compliance, legislative activities, public record requests, requests for non-covered services, State Plan Amendments, and the State Children's Health Insurance Program (SCHIP). Coordinates major initiatives resulting from federal health care reform and state legislative sessions. May serve as the primary liaison to legislators, Vermont's Congressional Delegation, the media and the Centers for Medicare and Medicaid Services (CMS).

Provider/Member Relations Unit

Communication/liaison activities that assist providers and beneficiaries in accessing clinically appropriate health services. Manages the Medicaid non-emergency transportation program, and other various provider contracts for services (such as the member services contract); interacts with groups/organizations that represent provider and member interests, such as the Medicaid Advisory Board; and maintains the DVHA web site.

Quality Improvement/Program Integrity

Responsible for activities to prevent, detect, and investigate Medicaid fraud, waste and abuse. Includes data mining and analysis; recoupment of provider overpayments; and lock-in programs for overutilization or abuse of the system. Educates providers for accurate billing, and refers cases of abuse to the

Deleted: The policy and reports unit is responsible for the state plan; policy related to coverage, providers, and delivery systems; management of the member services and ombudsman contracts; the 1115 waiver; exception requests and appeals; and coordination of the various reports that OVHA produces.¶

The provider reimbursement unit works with provider organizations and federal regulations to set and monitor the rates that OVHA pays for services. They also will research provider billing problems or complaints, and have responsibility for provider enrollment certification.¶

¶ The administrative services unit manages our business office and contracts. It includes accountants and auditors to constantly monitor the financial aspects of the programs.¶

Attorney General's office (provider fraud) and to DCF (eligibility fraud). Monitors Intergovernmental Agreements (IGAs) and collaborates with AHS partners that serve special health needs populations; prepares for annual external quality reviews for managed care organizations required by CMS, as well as for statewide and other quality audits; and provides concurrent review of psychiatric inpatient admissions.

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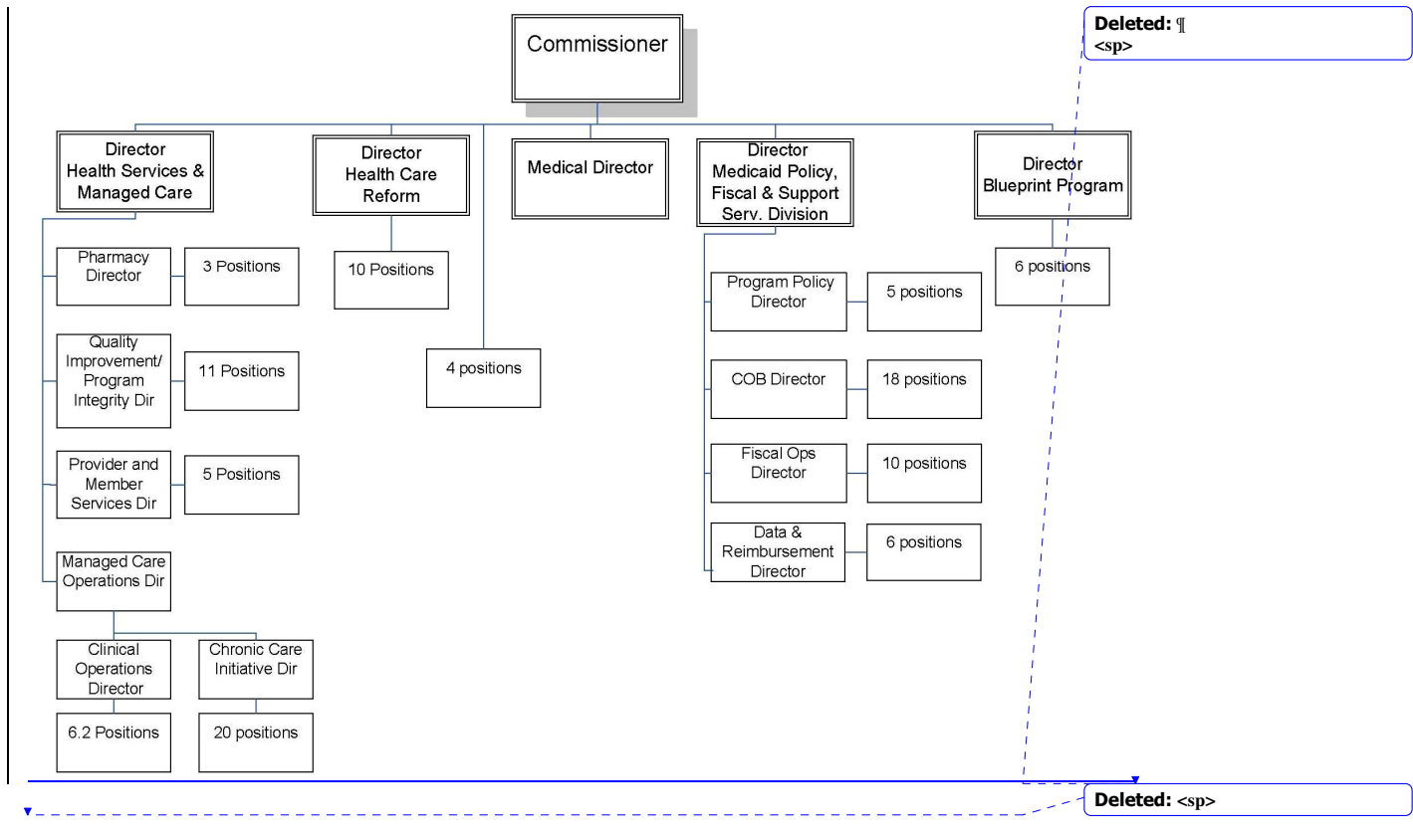
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PROFESSIONAL MEDICAL PERSONNEL AND SUPPORTING STAFF

The Department of Vermont Health Access (DVHA) engages a physician as a full-time Medical Director and a nurse in a full-time position as the Director of Health Services and Managed Care. The Blueprint for Health employs two full-time physicians, including the Blueprint for Health Director. In Care Coordination, the Director is a nurse and there are 12 nurses who are employed as Nurse Case Managers. In Clinical Operations, the Director is a nurse and there are four Nurse Case Managers, and three dentists. The Pharmacy Director is a pharmacist. The DVHA also employees a Licensed Clinical Mental Health Counselor.

Reference Attachment 1.2-B for additional details.

When necessary for consultation on prior authorizations, fair hearings, or exception requests, the DVHA has contractual relationships with clinical specialists such as physicians, dentists, physical therapists, and contracts such as the pharmacy benefits manager (PBM) contract, provide access to other pertinent clinical expertise. Other medical personnel is available in other departments within the agency.

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Economic Services

Responsible for the monitoring, evaluation, and operation of the Reach Up/TANF, Fuel Assistance, Food and Nutrition, General and Emergency Assistance, Essential Person, Aid to the Aged, Blind, and Disabled, and Health Care Assistance programs as it pertains to eligibility determination. Responsible for reviewing and analyzing proposed, pending and finalized Federal and State legislation to assure compliance in all assistance programs.